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APPLICANTS

Glenn Christopher Arnold, Knoxville, TN;
 Thach Cam Le, Irvine, CA;
 Ann Marie Kaesman, Los Angeles, CA;
 Daniel Louis Bates, Manhattan Beach, CA;
 Jorge Geaga, Los Angeles, CA;

HARON

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **
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** SMALL ENTITY **

| | | | | |
|---|-------------------------------|-----------------------------|---------------------------|--------------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no | STATE OR COUNTRY TN | SHEETS DRAWING 14 | TOTAL CLAIMS 15 | INDEPENDENT CLAIMS 1 |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | | | |
| Verified and Acknowledged <u>Examiner's Signature</u> <u>Initials</u> | | | | |

ADDRESS

KATTEN MUCHIN ZAVIS
 Attention: Patent Administrator
 Suite 1600
 525 West Monroe Street
 Chicago, IL60661-3693

TITLE

Real time interactive video system

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|-----------------------------------|---|--|
| FILING FEE RECEIVED 435 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees |
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